## Case 16-14994-mdc Doc 46 Filed 08/16/17 Entered 08/16/17 15:44:05 Desc Main Document Page 1 of 4

Fill	in this information t	o identify your c	ase:										
De	btor 1	Kareem Om	ari Samuel										
1	btor 2 buse, if filing)												
Un	ited States Bankrup	tcy Court for the	EASTERN DISTRICT	OF PENNSYLVANI	A	_							
Ca	se number 16-	10 11001					Check if this is:						
(If k	nown)						<b>I</b>	An amende	ed filing				
										g postpetition ollowing date:			
0	fficial Form	106I					_	MM / DD/ Y					
	chedule I:		ome				!	VIIVI / DD/ I	111		12/15		
spo atta	ouse. If you are sep ich a separate she	parated and you	are married and not fili ir spouse is not filing w On the top of any additi	ith you, do not inclu	ude infor	mati	on abou	ıt your spo	ouse. If me	ore space is	needed,		
1.	Fill in your empl information.	oyment		Debtor 1				Debtor 2	2 or non-fi	non-filing spouse			
	If you have more		Employment status	■ Employed				☐ Employed					
	attach a separate information about		Employment status	☐ Not employed				☐ Not employed					
	employers.		Occupation	painter									
	Include part-time, self-employed wo		Employer's name	bryn mawr auto	body								
	Occupation may i or homemaker, if		Employer's address	713 west haver Bryn Mawr, PA		enue	•						
			How long employed t	here? 10 yea	rs			_					
Pa	rt 2: Give De	tails About Moi	nthly Income										
	imate monthly incouse unless you are		ate you file this form. If	you have nothing to r	report for	any	line, writ	e \$0 in the	space. Inc	clude your noi	n-filing		
	ou or your non-filing e space, attach a se		ore than one employer, co	ombine the information	on for all	empl	oyers fo	that perso	on on the li	nes below. If	you need		
							For De	ebtor 1		btor 2 or ing spouse			
2.		List monthly gross wages, salary, and commissions (be deductions). If not paid monthly, calculate what the monthly			2.	\$	8	3,293.00	\$	N/A			
3.	Estimate and lis	t monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A			
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	8,2	93.00	\$	N/A			

Deb	tor 1	Kareem Omari Samuel	_	С	ase number (if kno	wn)	16-149	994		
					For Debtor 1			Debtor 2		
	Cor	by line 4 here	4.	_	\$ 8,293.	00	\$	iiiig ə	N/A	_
_	-						· —			-
5.		all payroll deductions:	_		Φ		•			
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$\$		\$		N/A	_
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.		\$0. \$200.	00	\$		N/A N/A	
	5d.	Required repayments of retirement fund loans	5d.			00	\$		N/A	_
	5e.	Insurance	5e.		\$ 284.		\$		N/A	_
	5f.	Domestic support obligations	5f.			00	\$		N/A	_
	5g.	Union dues	5g.		\$ 0.	00	\$		N/A	=
	5h.	Other deductions. Specify:	5h.	.+	\$ 0.	00	+ \$		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$2,950.	00	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$ 5,343.	00	\$		N/A	=
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.		\$ 0.	00	\$		N/A	
	8b.	Interest and dividends	8b.			00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	•	\$ 0.	00	\$		N/A	
	8d.	Unemployment compensation	8d.		. —	00	\$		N/A	
	8e.	Social Security	8e.			00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.			00	\$		N/A	_
	8g.	Pension or retirement income	8g.			00	\$		N/A	_
	8h.	Other monthly income. Specify: tax refund	8h.	.+	\$ 750.	00	+ \$		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	750.	00	\$		N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	6,093.00	+ \$		N/A	= \$	6,093.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,					.,
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00									
12.	12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12.								\$	6,093.00 ned
13.	Dο	you expect an increase or decrease within the year after you file this form	?						month	y income
		No.	•			_				
		Yes. Explain: child support expected to end in 30 months for s	step (	up.						

Fill	n this information to identify your case:							
Deb			Check if this is:					
			<b>■</b> A	n amended filing				
	tor 2		☐ A supplement showing postpetition chapter 13 expenses as of the following date:					
(Spc	ouse, if filing)							
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF PENNS	YLVANIA	M	M / DD / YYYY				
Cas	e number							
(If kı	nown)							
$\bigcirc$	ficial Form 106J							
					4044			
	chedule J: Your Expenses as complete and accurate as possible. If two married people ar	e filing together, ho	th are equal	ly responsible fo	r supplying correct			
info	rmation. If more space is needed, attach another sheet to this other (if known). Answer every question.							
Par	1: Describe Your Household							
1.	Is this a joint case?							
	No. Go to line 2.							
	Yes. Does Debtor 2 live in a separate household?							
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate House	hold of Debto	r 2				
0	, ,	Tor Coparate Floader	noid of Debto					
2.	Do you have dependents? ☐ No							
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?			
	Do not state the				□ No			
	dependents names.	fiancee			Yes			
				4	□ No			
		son		4	■ Yes □ No			
		daughter		8	■ Yes			
					□ No			
		son		11	Yes			
3.	Do your expenses include							
	expenses of people other than yourself and your dependents?							
Par	2: Estimate Your Ongoing Monthly Expenses							
Est exp	enace your expenses as of your bankruptcy filing date unless y enses as of a date after the bankruptcy is filed. If this is a supp licable date.	ou are using this followed	orm as a sup J, check the	plement in a Cha box at the top of	pter 13 case to report f the form and fill in the			
• • •								
	ude expenses paid for with non-cash government assistance it value of such assistance and have included it on Schedule I: Y							
(Off	icial Form 106I.)			Your expe	enses			
4.	The rental or home ownership expenses for your residence. In	nclude first mortgage						
٠.	payments and any rent for the ground or lot.	neidde mat mortgage	4. \$		1,265.46			
	If not included in line 4:							
	4a. Real estate taxes		4a. \$		0.00			
	4b. Property, homeowner's, or renter's insurance		4b. \$		100.00			
	<ul><li>4c. Home maintenance, repair, and upkeep expenses</li><li>4d. Homeowner's association or condominium dues</li></ul>		4c. \$ 4d. \$		27.00 0.00			
5.	Additional mortgage payments for your residence, such as ho	me equity loans	4u. 5 5. \$		0.00			

## 

Debtor 1 Ka	areem Omari Samuel	Case numb	per (if known)	16-14994
6. <b>Utilities:</b> 6a. Ele	: ectricity, heat, natural gas	6a.	\$	380.00
	ater, sewer, garbage collection	6b.	·	125.00
	elephone, cell phone, Internet, satellite, and cable services	6c.		
		6d.	·	550.00
	ther. Specify:	6u. 7.	·	0.00
	nd housekeeping supplies		\$	900.00
	re and children's education costs	8.	\$	25.00
_	g, laundry, and dry cleaning	9.	\$	250.00
	al care products and services	10.	\$	150.00
	and dental expenses	11.	\$	150.00
	ortation. Include gas, maintenance, bus or train fare. Include car payments.	12.	\$	400.00
	nment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	ble contributions and religious donations	14.	·	0.00
5. <b>Insuran</b>	•	17.		0.00
	nclude insurance deducted from your pay or included in lines 4 or 20.			
	fe insurance	15a.	\$	0.00
	ealth insurance	15b.	·	0.00
	ehicle insurance	15c.	·	250.00
	ther insurance. Specify:	15d.	•	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		<b>-</b>	0.00
Specify:	20	16.	\$	0.00
	ent or lease payments:			
	ar payments for Vehicle 1	17a.		0.00
	ar payments for Vehicle 2	17b.	·	0.00
	ther. Specify:	17c.	\$	0.00
	ther. Specify:	17d.	\$	0.00
	yments of alimony, maintenance, and support that you did not report as ed from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	ayments you make to support others who do not live with you.		\$	0.00
Specify:	aymonto you make to capport emercial and not not man your	19.	<u> </u>	0.00
	eal property expenses not included in lines 4 or 5 of this form or on Scho		ur Income.	
	ortgages on other property	20a.		0.00
20b. Re	eal estate taxes	20b.	\$	0.00
20c. Pr	roperty, homeowner's, or renter's insurance	20c.	\$	0.00
	aintenance, repair, and upkeep expenses	20d.		0.00
	omeowner's association or condominium dues	20e.		0.00
1. Other: S	Procify:	21.		0.00
	· · -		.Ψ	0.00
	te your monthly expenses			
	d lines 4 through 21.		\$	4,672.46
22b. Cop	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add	I line 22a and 22b. The result is your monthly expenses.		\$	4,672.46
				, · · · · · · · · · · · · · · · · · · ·
	te your monthly net income.		Φ.	
	opy line 12 (your combined monthly income) from Schedule I.	23a.		6,093.00
23b. Co	opy your monthly expenses from line 22c above.	23b.	-\$	4,672.46
23c. Si	ubtract your monthly expenses from your monthly income.			
	ne result is your monthly net income.	23c.	\$	1,420.54
	expect an increase or decrease in your expenses within the year after yourly let you expect to finish paying for your car loan within the year or do you expect you			ase or decrease because of a
	on to the terms of your mortgage?	i inorigage p	ayment to more	ase of decrease because of a
■ No.	, 5 5			
☐ Yes.	Explain here:			